

General

Title

Colorectal cancer: proportion of patients with colorectal cancer who undergo elective surgical resection which involves stoma creation who are seen and have their stoma site marked pre-operatively by a nurse with expertise in stoma care.

Source(s)

NHS Scotland, Scottish Cancer Taskforce. Colorectal cancer clinical quality performance indicators. Edinburgh (Scotland): Scottish Government, Healthcare Improvement Scotland; 2015 Mar. 32 p. [11 references]

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the proportion of patients with colorectal cancer who undergo elective surgical resection which involves stoma creation who are seen and have their stoma site marked pre-operatively by a nurse with expertise in stoma care.

Note from the National Quality Measures Clearinghouse: This measure is part of the Cancer Quality Performance Indicators (QPIs) collection. For more information, including a complete list of QPI measure sets, please visit the [Healthcare Improvement Scotland Web site](#)

Rationale

All patients who may require stoma formation (permanent or temporary) should be referred and assessed by a stoma nurse specialist before admission to hospital (Scottish Intercollegiate Guidelines Network [SIGN], 2011).

Access to a nurse with expertise in stoma care increases patient satisfaction and optimal independent functioning (NHS Quality Improvement Scotland, 2008). Furthermore, there is significant evidence to suggest that patients not marked pre-operatively can have significant problems with their stoma post operatively and this can affect their recovery and rehabilitation.

Before surgery, all patients should be offered information about the likelihood of having a stoma, why it might be necessary, and how long it might be needed for. A trained stoma professional should give specific information on the care and management of stomas to all patients considering surgery that might result in a stoma (National Institute for Health and Care Excellence [NICE], 2011).

Evidence for Rationale

National Institute for Health and Care Excellence (NICE). Colorectal cancer: diagnosis and management. London (UK): National Institute for Health and Care Excellence (NICE); 2011 Nov 1. 48 p. (Clinical guideline; no. 131).

NHS Quality Improvement Scotland. Management of bowel cancer services. Edinburgh (Scotland): NHS Quality Improvement Scotland; 2008 Mar. 41 p. [36 references]

NHS Scotland, Scottish Cancer Taskforce. Colorectal cancer clinical quality performance indicators. Edinburgh (Scotland): Scottish Government, Healthcare Improvement Scotland; 2015 Mar. 32 p. [11 references]

Scottish Intercollegiate Guidelines Network (SIGN). Diagnosis and management of colorectal cancer. A national clinical guideline. Edinburgh (Scotland): Scottish Intercollegiate Guidelines Network (SIGN); 2011 Dec. 56 p. (SIGN publication; no. 126). [211 references]

Primary Health Components

Colorectal cancer; elective surgical resection; stoma care; stoma nurse specialist

Denominator Description

All patients with colorectal cancer who undergo elective surgical resection which involves stoma creation (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Number of patients with colorectal cancer who undergo elective surgical resection which involves stoma creation who are seen by and have their stoma site marked pre-operatively by a nurse with expertise in stoma care (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The collection of data is piloted on a small number of patient records using a paper data collection form produced by Information Services Division (ISD). The aim is to identify any anomalies or difficulties with data collection prior to full implementation. At least one NHS board in each Regional Cancer Network participates in the pilot.

Evidence for Extent of Measure Testing

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Hospital Inpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Unspecified

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All patients with colorectal cancer who undergo elective surgical resection which involves stoma creation

Exclusions

Patients who refuse to be seen by a nurse with expertise in stoma care

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of patients with colorectal cancer who undergo elective surgical resection which involves stoma creation who are seen by and have their stoma site marked pre-operatively by a nurse with expertise in stoma care

Exclusions

Patients who refuse to be seen by a nurse with expertise in stoma care

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Prescriptive Standard

Target: 95%

The tolerance within this target is designed to account for situations where unexpected findings or technical difficulties at surgery mean that a stoma was fashioned when not originally planned.

Evidence for Prescriptive Standard

NHS Scotland, Scottish Cancer Taskforce. Colorectal cancer clinical quality performance indicators. Edinburgh (Scotland): Scottish Government, Healthcare Improvement Scotland; 2015 Mar. 32 p. [11 references]

Identifying Information

Original Title

QPI 4 – stoma care.

Measure Collection Name

Cancer Quality Performance Indicators (QPIs)

Measure Set Name

Colorectal Cancer

Submitter

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Developer

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Funding Source(s)

Scottish Government

Composition of the Group that Developed the Measure

Colorectal Cancer QPI Development Group

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2016 Mar

Measure Maintenance

The Cancer Quality Performance Indicators (QPIs) will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

Measure Availability

Source document available from the [Healthcare Improvement Scotland Web site](#) .

For more information, contact the Healthcare Improvement Scotland at Gyle Square, 1 South Gyle Crescent, Edinburgh, Scotland EH12 9EB; Phone: 0131 623 4300; E-mail: comments.his@nhs.net; Web site: www.healthcareimprovementscotland.org/ .

Companion Documents

The following is available:

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p. This document is available from the [Healthcare Improvement Scotland Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on June 21, 2017.

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Production

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